

PROVIDER BULLETIN

Volume 39 Number 45

<http://dss.mo.gov/mhd/>

March 23, 2017

Comprehensive and Community Support Waivers: Personal Assistant Services

CONTENTS

- **Waiver Renewal**
 - **MO HealthNet Developmental Disabilities (DD) Waiver Provider Manual**
 - **Personal Assistant**
 - **Provider Requirement Revisions**
 - **Personal Assistant Services Billing Information**
-

Waiver Renewal

The Comprehensive and Community Support Waivers renewals were submitted to the Centers for Medicare and Medicaid Services (CMS) and approved by CMS effective July 1, 2016. The Personal Assistant (PA) definition was revised as described below. Revisions to other waiver services are described in separate provider bulletins.

MO HealthNet DD Waiver Provider Manual

The MO HealthNet DD Waiver Provider Manual has not been updated with the information in this bulletin. The provider manuals will be updated when the remaining Department of Mental Health Waivers (MO Children with Developmental Disabilities, Partnership for Hope, and Autism Waivers) have been amended or renewed to reflect changes noted in this bulletin. The information contained in this bulletin is applicable to the Comprehensive and Community Support Waivers effective July 1, 2016.

Personal Assistant

The following information describes the revisions for the approved PA definition:

- PA services previously included a separate authorization for Medical/Behavioral. In the waiver renewal, the medical component remains within the PA service. The behavioral component has been eliminated due to the new Applied Behavior Analysis (ABA) services included in the waiver application. The ABA services include a component for Registered Behavior Technician (RBT) that will cover the behavioral needs in conjunction with PA services.
- **Medical Personal Assistance**
To assist in meeting the specialized medical needs for the individual as identified by the team and documented in the individual support plan (ISP), the following must be met:

- The interdisciplinary team has identified and outlined the need to pursue more intensive support for medically related issues;
- The need must be documented by a physician or advanced practice nurse and maintained on file;
- Prior to approval of funding for medical PA, the ISP must undergo the local Utilization Review (UR) review process to determine the above has been completed; and
- Dependent upon the scope of service, a registered nurse may be required to provide oversight in accordance with the Missouri Nurse Practice Act.
- PA services do not include general supervision and protective oversight.
- PA services shall not be provided by an individual's power of attorney.
- After State Plan Services are exhausted, DD Waiver PA services may be authorized when:
 - State plan limits on number of units for personal care are reached and more assistance with Activities of Daily Living (ADL) and/or Instrumental Activities of Daily Living (IADL) is needed;
 - Person requires PA services at locations outside of their residence;
 - The individual has medical needs that cannot be met through the state plan program;
 - When the PA is related to the individual; and
 - When the individual or family is directing the service through the Fiscal Management Services (FMS) contractor.
- Personal care services are provided to children with disabilities according to the federal mandates of the Early Periodic Screening, Diagnosis and Treatment (EPSDT) program. PA needs for the eligible person through EPSDT, as applicable, shall be accessed and utilized, in accordance with the requirement that state plan services must be exhausted before waiver services can be provided. PA services authorized through the waiver shall not duplicate state plan personal care services. State plan personal care services for children are coordinated through the Bureau of Special Health Care Needs.
- **Non-Duplication of Services**
 - PA services shall not duplicate other services. PA services are not available to waiver participants who reside in community residential facilities (Group Homes and Residential Care Centers). Persons who receive Individualized Supported Living (ISL) services shall not receive PA services at their home but may receive this service outside the home - if it is not included in the ISL budget.
- **PA Service Limitations**
 - When this service is provided to minor children living with their parents or guardians, it shall not supplant the cost and provision of support ordinarily provided by parents to children without disabilities, nor shall it supplant educationally related services and support that is the responsibility of local education authorities.

Otherwise, the only limitation on hours provided is the individual's need for the service as an alternative to institutional care and the overall cost effectiveness of his or her service plan. PA services can occur in the person's home and/or community, including the work place. PA services shall not be provided concurrently, with or as a substitute for, facility-based Day Habilitation (DH) services.

- PA services through EPSDT for eligible persons under age 21 shall be provided and utilized first before the waiver PA service is provided.

- **PA Qualifications and Training**

- Training will cover, at a minimum:
 - a. Training, procedures and expectations related to the PA in regards to following and implementing the ISP;
 - b. The rights and responsibilities of the employee and the individual, procedures for billing and payment, reporting and documentation requirements, procedures for arranging backup when needed, and who to contact within the Regional Office or Targeted Case Management entity;
 - c. Information about the specific condition and needs of the person to be served, including his or her physical, psychological or behavioral challenges, his or her capabilities, and his or her support needs and preferences related to that support;
 - d. Training in abuse/neglect, event reporting, and confidentiality;
 - e. Duties of the PA will not require skills to be attained from the training requirement;
 - f. CPR and first aid;
 - g. Additionally staff administering medication and/or supervising self-administration of meds must have successfully met the requirements of 9 CSR 45-3.070;
 - h. Crisis Intervention Training (CIT), as needed, due to challenging behavior by the individual, and the assistant will also be trained in crisis intervention techniques such as NCI (Nonviolent Crisis Intervention), MANDT, or others approved by the Division of DD);
 - i. Training in communications skills in understanding and respecting individual choice and direction, cultural and ethnic diversity, personal property and familial and social relationships in handling conflict and complaints; and
 - j. Training in assisting with activities of daily living and instrumental activities of daily living, as needed by the individual to be served and identified by the team.
- For self-directed services, the planning team will specify the qualifications and training the PA will need in order to carry out the support plan, where and by whom the assistant will be trained, and the source, method and degree of monitoring but not less than quarterly. To the extent they desire, the individual or designated representative will select the PA and carry out training and supervision.

- The individual/guardian or designated representative may exempt the PA from trainings when the following is documented:
 - a. Duties of the PA will not require skills to be attained from the training requirement;
 - b. The PA has adequate knowledge or experience in the training subjects listed below:
 - CPR and first aid;
 - Medication administration;
 - Crisis Intervention Training, as needed, due to challenging behavior by the individual, the assistant will also be trained in crisis intervention techniques such as NCI (Nonviolent Crisis Intervention), MANDT, or others approved by the Division of DD;
 - Training in communications skills, in understanding and respecting individual choice and direction, cultural and ethnic diversity, personal property and familial and social relationships, in handling conflict and complaints; and
 - Training in assisting with activities of daily living and instrumental activities of daily living, as needed by the individual to be served and identified by the team.

Provider Requirement Revisions

PA services can be self-directed if the individual chooses. An employee of the consumer/family must be age 18, has completed Abuse and Neglect training/reporting events and training on the ISP, meets minimum training requirements; and has an agreement with the individual/designated representative. The planning team will specify the qualifications and training the PA will need in order to carry out the service plan. Supervision is provided by the individual or a designated representative in providing service in the home or community consistent with the service plan.

A relative employed by consumer/family must be age 18, has completed Abuse and Neglect training/reporting events and training on the ISP, meets minimum training requirements, and has an agreement with the individual/designated representative. The relative shall not be the consumer's spouse, a parent of a minor child (under age 18), a legal guardian, nor the employer of record for the consumer. The individual shall not be opposed to the family member providing care. The planning team agrees the family member providing the PA service will best meet the individual's needs. Family members employed by the consumer or designated representative are supervised by the consumer or a designated representative in providing service in the home or community consistent with the service plan. Family members employed by an agency are supervised by the agency.

This service can also be provided by an agency or an individual contractor. An agency can be a DH or an ISL services provider. A DH or ISL provider must be certified by Department of Mental Health (DMH) or accredited by the Commission on Accreditation of Rehabilitation Facilities (CARF), The Council on Quality and Leadership (CQL) or Joint Commission. An agency may also be a MO HealthNet enrolled provider of personal care services. The agency-based provider of PA services must be trained and supervised in accordance with the certification or program enrollment requirements that apply, but must include at least the

minimum training specified for the individual provider; the planning team may specify additional qualifications and training necessary to carry out the plan.

An individual may be an independent contractor who must have a Missouri State professional license such as Registered Nurse (RN) or Licensed Practical Nurse (LPN). The independent contractor must have a DMH contract and shall not be the individual's spouse, a parent of a minor child (under age 18), nor a legal guardian.

Personal Assistant Services Billing Information

Waiver Service	Code(s)	Service Unit	Maximum Units of Service
PA Individual, Self-Directed	T1019 U2	15 minutes	96 units per day
PA Agency/Contractor	T1019	15 minutes	96 units per day
PA, Group Size 2-3	T1019 HQ	15 minutes	96 units per day
PA, Group Size 4-6	T1019 HQ	15 minutes	96 units per day
PA, Medical, Agency/Contractor	T1019 SC	15 minutes	96 units per day
PA, Medical, Self-Directed	T1019 SC SE	15 minutes	96 units per day

Provider Bulletins are available on the MO HealthNet Division (MHD) (Formerly the Division of Medical Services) Web site at <http://dss.mo.gov/mhd/providers/pages/bulletins.htm>. Bulletins will remain on the Provider Bulletins page only until incorporated into the [provider manuals](#) as appropriate, then moved to the Archived Bulletin page.

MO HealthNet News: Providers and other interested parties are urged to go to the MHD Web site at <http://dss.mo.gov/mhd/> to subscribe to the electronic mailing list to receive automatic notifications of provider bulletins, provider manual updates, and other official MO HealthNet communications via E-mail.

The information contained in this bulletin applies to coverage for:

- MO HealthNet Fee-for-Service
- Managed Care Services

Questions regarding MO HealthNet Managed Care benefits should be directed to the patient's MO HealthNet Managed Care health plan. Before delivering a service, please check the patient's eligibility status by swiping the MO HealthNet card or by calling the Provider Communications Interactive Voice Response (IVR) System at 573-751-2896 and using Option One for the red or white card.

Provider Communications Hotline
573-751-2896